

EXHIBIT D

IN THE CIRCUIT/COUNTY COURT OF THE _____ JUDICIAL CIRCUIT
IN AND FOR Seminole COUNTY, FLORIDACASE NO. 2021-CA-2237

Pierce Robertson
Plaintiff/Petitioner or In the Interest of
Shawn Portocarrero
Defendant/Respondent

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you qualify for civil indigence, the filing and summons fees are waived; other costs and fees are not waived.

1. I have 0 dependents. (Include only those persons you list on your U.S. Income tax return.)Are you Married?...Yes No Does your Spouse Work?...Yes No Annual Spouse Income? \$ 02. I have a net income of \$ 0 paid () weekly () every two weeks () semi-monthly () monthly () yearly () other _____
(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court-ordered payments such as child support.)3. I have other income paid () weekly () every two weeks () semi-monthly X monthly () yearly () other _____
(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

| | | | | | |
|---------------------------|-------------------|--------------|---------------------------------------|-----------------|--------------|
| Second Job | Yes \$ <u>0</u> | No <u>No</u> | Veterans' benefits | Yes \$ <u>0</u> | No <u>No</u> |
| Social Security benefits | Yes \$ <u>947</u> | No <u>No</u> | Workers compensation | Yes \$ <u>0</u> | No <u>No</u> |
| For you | Yes \$ <u>0</u> | No <u>No</u> | Income from absent family members | Yes \$ <u>0</u> | No <u>No</u> |
| For child(ren) | Yes \$ <u>0</u> | No <u>No</u> | Stocks/bonds | Yes \$ <u>0</u> | No <u>No</u> |
| Unemployment compensation | Yes \$ <u>0</u> | No <u>No</u> | Rental income | Yes \$ <u>0</u> | No <u>No</u> |
| Union payments | Yes \$ <u>0</u> | No <u>No</u> | Dividends or interest | Yes \$ <u>0</u> | No <u>No</u> |
| Retirement/pensions | Yes \$ <u>0</u> | No <u>No</u> | Other kinds of income not on the list | Yes \$ <u>0</u> | No <u>No</u> |
| Trusts | Yes \$ <u>0</u> | No <u>No</u> | Gifts | Yes \$ <u>0</u> | No <u>No</u> |

I understand that I will be required to make payments for costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise circle "No")

| | | | | | |
|----------------------------|---------------------|--------------|--|-----------------------|--------------|
| Cash | Yes \$ <u>36</u> | No <u>No</u> | Savings account | Yes \$ <u>0</u> | No <u>No</u> |
| Bank account(s) | Yes \$ <u>13,26</u> | No <u>No</u> | Stocks/bonds | Yes \$ <u>0</u> | No <u>No</u> |
| Certificates of deposit or | Yes \$ <u>0</u> | No <u>No</u> | Homestead Real Property* | Yes \$ <u>114,000</u> | No <u>No</u> |
| Money market accounts | Yes \$ <u>0</u> | No <u>No</u> | Motor Vehicle* | Yes \$ <u>1,000</u> | No <u>No</u> |
| Boats* | Yes \$ <u>0</u> | No <u>No</u> | Non-homestead real property/real estate* | Yes \$ <u>0</u> | No <u>No</u> |
| | | | Other assets* | Yes \$ <u>0</u> | No <u>No</u> |

Check one: I () DO X DO NOT expect to receive more assets in the near future. The asset is _____5. I have total liabilities and debts of \$ _____ as follows: Motor Vehicle \$ 0, Home \$ 100,000, Boat \$ 0, Non-homestead Real Property \$ 0, Child Support paid direct \$ 0, Credit Cards \$ 14,348.6, Medical Bills \$ 697, Cost of medicines (monthly) \$ 212, Other \$ 0.6. I have a private lawyer in this case _____ Yes No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed on 9-14, 2021
1981 2060
Year of Birth Last 4 digits of Driver License or ID Number
Email address: _____

Signature of Applicant for Indigent Status
Print Full Legal Name Pierce Robertson
Phone Number/s: 407-335-1529

4357 Northern danner way, orlando, FL 32826
Address: Street, City, State, Zip Code

This form was completed with the assistance of: _____
Clerk/Deputy Clerk/Other authorized person.

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be X Indigent () Not Indigent, according to s. 57.082, F.S.Dated on September 14, 2021.
GRANT MALOY, CLERK OF
CIRCUIT COURT & COMPTROLLER
Clerk of the Circuit CourtBy Haley CroughAPPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME. THERE IS NO FEE FOR THIS REVIEW.
Sign here if you want the judge to review the clerk's decision _____